

*L. L. L.*

**WORSBROUGH**  
**URBAN DISTRICT COUNCIL**  
YORKS.



**ANNUAL**  
**REPORT**

of the  
**MEDICAL OFFICER OF HEALTH**  
and  
**PUBLIC HEALTH INSPECTOR**

***for the Year 1956***




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**URBAN DISTRICT COUNCIL**  
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## **PUBLIC HEALTH COMMITTEE**

Chairman of the Council . . . Councillor G. Schofield, J.P.

Chairman . . . . . Councillor R. Atkinson, B.E.M., J.P.

Messrs. Councillors C. W. Boland, A. O. Elmhirst, C. Greenwood, C. W. Guest, F. Holling, F. Scothorn, W. Smith, W. H. Wadsworth, A. Wantling and H. Wootton.

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## **PUBLIC HEALTH STAFF**

### **Medical Officer of Health:**

R. S. HYND, M.B., Ch.B., D.P.H.

(Resigned November, 1956).

R. BARNES, B.A., M.R.C.S., L.R.C.P., D.P.H.

(Appointed December, 1956).

### **Deputy Medical Officer of Health:**

R. BARNES, B.A., M.R.C.S., L.R.C.P., D.P.H.

(To 30th November, 1956).

### **Medical Officers of Infant Welfare Clinics: (Part-time)**

Birdwell Clinic: J. S. L. Allott, M.B. Ch.B., D.P.H.

Blacker Hill Clinic: J. H. Fairclough, M.B., Ch.B.

Worsbrough Bridge Clinic: C. H. Ball, L.M.S.S.A.

Worsbrough Dale Clinic: J. H. Ritchie, M.B., Ch.B.

### **Medical Officers of Ante-natal Clinics: (Part-time)**

Birdwell Clinic: J. H. Ritchie, M.B., Ch.B.

Worsbrough Bridge Clinic: K. Mathers, M.B., Ch.B.

Worsbrough Dale Clinic: K. Mathers, M.B., Ch.B.

### **Chief Public Health Inspector:**

L. DOVE, Cert.S.I.B., M.A.P.H.I.

Certificated Inspector of Meat and Other Foods.

### **Additional Public Health Inspector:**

G. W. AMES, Cert.S.I.B., M.A.P.H.I.

Certificated Inspector of Meat and Other Foods.

### **Health Visitors:**

M. Barlow, S.R.N., S.C.M., H.V.Cert.

(Resigned September, 1956).

M. Baker, S.R.N., S.C.M., H.V.Cert.

F. A. Manley, S.R.N., S.C.M., H.V.Cert.

A. M. Widdison, S.R.N., S.C.M., H.V.Cert.

(From October, 1956).

### **Tuberculosis Visitor:**

M. Mellor, S.R.N.

### **Senior Clerk, Divisional Health Office:**

L. S. Wrigg.





# WORSBROUGH URBAN DISTRICT COUNCIL

Divisional Health Office,  
6 Victoria Road,  
BARNSELEY  
January, 1958

## ANNUAL REPORT

**for the Year ended 31st December, 1956**

To the Chairman and Members of the Worsbrough Urban District Council:

Mr. Chairman, Gentlemen,

I have the honour to present to you my first Annual Report on the health and social conditions of your district for the year ended 31st December, 1956. Since only one month of the year came within my term of office, comment will necessarily be brief.

It is appropriate to make comment on the progress which the Council has made with its slum clearance programme, although it must be realised that Worsbrough has before it still a large problem in relation to unfit houses. In view of the progress made it is disappointing that the vital statistics which express in numerical terms the health of your district have not shown any corresponding improvement. The infant mortality rate was the highest recorded in your district since 1944, although this was to some extent off-set by the reduction in the number of stillbirths. Nevertheless, I think this shows that there is no room for complacency in regard to our maternity and child welfare services. The other adverse criticism which I have to make is in the state of immunity against the various diseases of the pre-school population. These figures are the lowest in the division, and I will certainly make every effort to remedy this state of affairs. In other respects the report is generally satisfactory.

I would like to take this opportunity to thank the Chairman and Members of the Health Committee for their support and continued interest in all matters relating to the health of the district, my divisional health staff for their willing assistance and your Chief Public Health Inspector, Mr. L. Dove, for his help and loyal co-operation.

I am,

Your obedient servant,

R. BARNES,

Medical Officer of Health.

## URBAN DISTRICT OF WORSBROUGH

### Statistics and Social Conditions:

Area .....	3,420 acres
Population (Census 1951) .....	14,155
Registrar General's estimate of population mid 1956 .....	14,440
No. of inhabited houses according to rate book 31st December, 1956 .....	4,357
Rateable Value 31st December, 1956 .....	£90,239
Nett Product of a Penny Rate (1956-1957) .....	358

Coal mining is the principal occupation of the population. Other industries in the district include three small textile factories and a saw mill, and though the number of persons employed in these concerns is relatively small they help, nevertheless, in the industrial life of the district.

### VITAL STATISTICS

#### Live Births

	Males	Females	Total
Legitimate .....	105	122	227
Illegitimate .....	7	5	12
Totals	112	127	239

The number of live births registered was 1 more than for 1955. The Registrar General has again supplied a comparability factor for the year which relates the proportion of women in the district of child-bearing age with the proportion in a standard population. The crude birth rate multiplied by the comparability factor gives an adjusted birth rate which is comparable with similar adjusted birth rates in other districts and with the birth rate for the country as a whole. The adjusted birth rate for your district last year was 16.6 per 1,000 estimated population as compared with 16.5 per 1,000 estimated population in 1955 and with 15.7 per 1,000 estimated population in England and Wales. The excess of births over deaths, or the natural increase of population, was 93 as compared with 98 for the previous year.

#### Stillbirths

	Males	Females	Total
Legitimate .....	1	3	4
Illegitimate .....	—	—	—
Totals	1	3	4

The stillbirth rate was 16.5 per 1,000 total births as compared with 28.6 per 1,000 total births in 1955 and with 23.0 per 1,000 total births for England and Wales.



Deaths

The adjusted death rate, which is the crude death rate multiplied by the comparability factor was 13.9 per 1,000 estimated population, as compared with 12.2 per 1,000 estimated poulation for 1955 and with 11.7 per 1,000 estimated population for England and Wales. There were 146 deaths among the inhabitants of your district, six more than in the previous year. The principal causes of death in order of numerical importance were: heart and circulatory diseases, cancer and respiratory diseases.

Statistics relating to death rates and the causes and ages at death are given in tabular form at the end of the section on vital statistics.

Infant Mortality and Peri-Natal Mortality

The infant mortality for 1956 was 54.4 per 1,000 live births, the highest recorded rate in your district since 1944. The rate for the previous year was 12.6 per 1,000 live births, which was the lowest recorded rate for your district. This is compared with 23.8 per 1,000 live births for England and Wales.

Infant Mortality in 1956

	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	1- 3 months	3- 6 months	6- 9 months	9-12 months	1 year Total under
Congenital Abnormalities .....	5	—	—	—	5	—	—	—	—	5
Prematurity .....	4	—	—	—	4	—	—	—	—	4
Staphylococcus Septicaemia .....	—	—	—	—	—	1	—	—	—	1
Cot Death .....	—	—	—	—	—	1	—	—	—	1
Gastro enteritis .....	—	—	—	—	—	1	1	—	—	2
Totals	9	—	—	—	9	3	1	—	—	13

There were 13 infant deaths, 9 of them occurring in the neo-natal period from causes which were essentially congenital and pre-natal. Much has been written on the subject of peri-natal mortality and it must be agreed that it is a good expression of our standard of ante-natal care, although many of the causes of death are outside the scope of present day medical knowledge. Peri-natal mortality is expressed as the number of Stillbirths plus the number of deaths in the first week of life.

It must be understood that neo-natal deaths and stillbirths are to some extent interchangeable and the peri-natal figure for your district is thus off-set by the reduction in the number of stillbirths from 7 to 4.

I give below the record of your district in respect of peri-natal mortality over the past seven years.

	Live Births	Still-births	Under 1 week	Peri-natal
1950	234	4	3	29.4
1951	248	3	9	47.8
1952	237	5	2	41.3
1953	264	9	3	43.9
1954	219	4	5	40.3
1955	238	7	1	32.6
1956	239	4	9	45.2

DEATHS IN AGE GROUPS

	Males	Females	Total
Under 1 year .....	7	6	13
1- 5 years .....	1	—	1
5-10 years .....	—	—	—
10-15 years .....	2	—	2
15-20 years .....	—	—	—
20-25 years .....	—	—	—
25-35 years .....	—	2	2
35-45 years .....	3	1	4
45-55 years .....	9	4	13
55-65 years .....	15	8	23
65-70 years .....	13	10	23
70-75 years .....	6	11	17
75-80 years .....	14	7	21
80-85 years .....	8	16	14
85-90 years .....	1	2	3
90 years and over .....	—	—	—
TOTALS .....	79	67	146

PRINCIPAL VITAL STATISTICS FOR THE YEAR 1956

Based on the Registrar General's Figures

	Worsbro' Urban District	Aggregate West Riding Urban Districts	West Riding Admin. County	England and Wales (prov. figures)
Birth Rate per 1,000 estimated population:				
Crude .....	16.6	15.8	16.4	15.7
Adjusted .....	16.6	16.0	16.5	15.7
Death Rate per 1,000 estimated population:				
Crude .....	10.1	12.6	11.8	11.7
Adjusted .....	13.9	13.1	12.9	11.7
Infective and Parasitic diseases excluding Tuberculosis but including Venereal Diseases	0.0	0.07	0.07	Not available
Tuberculosis:				
Respiratory .....	—	0.11	0.11	0.11
Other .....	—	0.01	0.02	0.01
All forms .....	—	0.12	0.13	0.12
Cancer .....	1.59	2.05	1.89	2.08
Vascular lesions of the nervous system .....	0.83	2.05	1.86	Not available
Heart and circulatory diseases	3.67	4.76	4.47	Not available
Respiratory diseases .....	1.39	1.37	1.29	Not available
Maternal Mortality .....	0.0	0.69	0.52	0.56
Infant Mortality .....	54.4	25.9	27.1	23.8
Stillbirths .....	16.5	23.5	23.1	23.0

## CAUSES OF DEATH IN 1956

Causes of Death						Males	Females
1.	Tuberculosis, respiratory	.....	.....	.....	.....	—	—
2.	Tuberculosis, other	.....	.....	.....	.....	—	—
3.	Syphilitic Disease	.....	.....	.....	.....	—	—
4.	Diphtheria	.....	.....	.....	.....	—	—
5.	Whooping Cough	.....	.....	.....	.....	—	—
6.	Meningococcal Infections	.....	.....	.....	.....	—	—
7.	Acute Poliomyelitis	.....	.....	.....	.....	—	—
8.	Measles	.....	.....	.....	.....	—	—
9.	Other infective and parasitic diseases	.....	.....	.....	.....	—	—
10.	Malignant Neoplasm, stomach	.....	.....	.....	.....	2	1
11.	Malignant Neoplasm, lung, bronchus	.....	.....	.....	.....	4	—
12.	Malignant Neoplasm, breast	.....	.....	.....	.....	—	2
13.	Malignant Neoplasm, uterus	.....	.....	.....	.....	—	1
14.	Other malignant and lymphatic neoplasms	.....	.....	.....	.....	5	8
15.	Leukaemia, aleukaemia	.....	.....	.....	.....	—	—
16.	Diabetes	.....	.....	.....	.....	—	1
17.	Vascular lesions of nervous system	.....	.....	.....	.....	7	5
18.	Coronary disease, angina	.....	.....	.....	.....	14	7
19.	Hypertension with heart disease	.....	.....	.....	.....	1	2
20.	Other heart disease	.....	.....	.....	.....	7	18
21.	Other circulatory disease	.....	.....	.....	.....	2	2
22.	Influenza	.....	.....	.....	.....	—	—
23.	Pneumonia	.....	.....	.....	.....	3	1
24.	Bronchitis	.....	.....	.....	.....	13	2
25.	Other diseases of respiratory system	.....	.....	.....	.....	—	1
26.	Ulcer of stomach and duodenum	.....	.....	.....	.....	—	1
27.	Gastritis, enteritis and diarrhoea	.....	.....	.....	.....	1	1
28.	Nephritis and nephrosis	.....	.....	.....	.....	2	—
29.	Hyperplasia of prostate	.....	.....	.....	.....	—	—
30.	Pregnancy, childbirth, abortion	.....	.....	.....	.....	—	—
31.	Congenital malformations	.....	.....	.....	.....	1	1
32.	Other defined and ill-defined diseases	.....	.....	.....	.....	9	12
33.	Motor vehicle accidents	.....	.....	.....	.....	1	—
34.	All other accidents	.....	.....	.....	.....	5	—
35.	Suicide	.....	.....	.....	.....	2	1
36.	Homicide and operations of war	.....	.....	.....	.....	—	—
All causes						79	67



## **GENERAL PROVISION OF THE HEALTH SERVICES IN THE AREA**

The problem of residential accommodation for the aged and infirm is the responsibility of the County Council. The responsibility for the provision of chronic sick hospital accommodation rests with the Regional Hospital Board. I think, by now, we are all aware of the difficulties inherent in such a state of divided responsibility, and I think that little can be added to the solution of the problem by extolling the difficulties which inevitably are encountered. Many patients seem to fall between the two groups in that they are too frail for Part III Accommodation and yet are not chronic sick in the usual meaning of the term. The problem of old people needing ground floor accommodation in hostels has remained as difficult as ever.

Comment on the hospital provision for the acute sick, maternity patients and those suffering from infectious diseases can be brief for the services provided were, as always, both adequate and good.

### **General Hospitals**

The general hospitals serving your district and administered through the Sheffield Regional Hospital Board are given below:

1. The United Group Hospitals, Sheffield.
2. The Beckett Hospital, Barnsley.
3. The St. Helen Hospital, Barnsley.
4. The Moorgate General Hospital, Rotherham.

### **Infectious Diseases Hospitals**

All infectious diseases requiring hospital admission were admitted to the Kendray Hospital, Barnsley. The ambulance arrangements were the same as for the previous year with the hospital retaining its own ambulance for this service.

### **Maternity Hospitals**

Maternity cases were usually admitted to the following hospitals:

1. St. Helen Hospital, Barnsley.
2. Montagu Hospital, Mexborough.
3. Hallamshire Maternity Home, Chapeltown.
4. Pindar Oaks Maternity Home, Barnsley.

The services of the Jessop Hospital, Sheffield were also available for abnormal obstetric cases.

### **Tuberculosis Scheme**

The co-operation between the Chest Centre and the Health Department continued, and, consequently, the essential link between the curative and preventive aspects of Tuberculosis



was maintained. The two whole-time Tuberculosis Visitors, while employed by the local authority, had, for practical reasons, their day-to-day duties arranged by the Chest Physician. This very effective arrangement enhanced the value of their work for they came to know the tuberculosis patient and his contacts equally and were able to give advice to both alike.

The after-care arrangements included extra nourishment, when recommended by the Chest Physician, in the form of a free milk allowance and bed, bedding and other nursing equipment was issued on loan to patients where necessary. The Home Help service was also available when required.

The programme of the clinics held at the Chest Centre, 46 Church Street, Barnsley is given below:

Tuesday,	10.0 a.m. to 12.0 noon (children)
Wednesday,	10.0 a.m. to 12.0 noon
Wednesday,	2.0 p.m. to 4.0 p.m.
Thursday,	10.0 a.m. to 12.0 noon
Friday,	10.0 a.m. to 12.0 noon

### **Venereal Diseases**

The nearest centre for Worsbrough patients for the diagnosis and treatment of these diseases is in Barnsley.

Address: Special Treatment Centre,

Queen's Road,  
BARNSELY.

Other centres are situate at Sheffield, Doncaster and Rotherham, and a patient suffering from Venereal Disease is at liberty to attend at the centre of his choice. Treatment is completely confidential.

### **Ambulance Service**

For the first time the amount of work carried out by the local ambulance service has been reduced. The number of patients carried was nearly 2,000 fewer than in 1955, and almost 10,000 miles were saved.

This is thought largely to be due to the more efficient use of the service, which is possible with radio control: and the use of an Ambulance Officer at Beckett Hospital, Barnsley, has also helped to provide a more efficient use of the service.

### **Home Nursing**

The Home Nurses in the Division made 53,448 visits last year. 20,287 of these being medical cases. 9,070 were to surgical cases and 265 visits were made to tuberculosis patients. The total number of visits made during the year showed a slight decrease, although the number of visits made for the purpose of injections rose by nearly 2,000 to 23,747. I feel that with the present establishment of Home Nurses

a peak has been reached in the number of visits made. There is obviously a limit to the amount of work which can be done by a given number of nurses. The number of visits made to old people over the age of 65 again accounted for nearly 60% of the total visits. 721 visits were made to children under five years of age. The home nursing service, in conjunction with the general practitioners of your area, is undoubtedly making a large contribution towards treating many patients in their own homes. But for this, I am afraid, the problems of chronic sick accommodation might be even worse than it is today.

### **Home Help Service**

The home help service continued in 1956 to provide a service mainly for the old people of your district. 90% of the available home help hours were again given to such households.

An increase in the establishment of home helps was received towards the end of the year, but this was really too late to have much effect on the figures for 1956. On average 342 households per week were assisted as against 300 in 1955. The average weekly assistance given to old people was just under four hours to each old person. The Hospital Authorities on many occasions sought our assistance towards providing a home help for an old person before he or she was discharged from hospital. I think there is still room for improvement in the co-operation between the Hospitals and the local health authority along these lines.

Approximately 2% of the Home Help hours were given to **maternity cases**. These cases are not numerous, but when they do occur, the number of hours per week required is often as high as 24-30.

Sometimes by providing a home help to a maternity case, a break-up of the family can be avoided, as otherwise children might have to be taken into care, during the confinement, by the Children's Department.

### **Laboratory Service**

The laboratory service was provided by the Public Health Laboratory in Wakefield, a national service under the control of the Medical Research Council. The laboratory is equipped to deal with all bacteriological and pathological examinations, and a complete investigation is undertaken and report furnished for every specimen sent for examination.

Samples of milk taken under the Food and Drugs Act for chemical analysis were examined by the Public Analyst at Bradford at the expense of the County Council.



**Maternity and Child Welfare Service**

The four Maternity and Child Welfare Centres serving the district are situate at Worsbrough Bridge, Worsbrough Dale, Birdwell and Blacker Hill. The attendances at these clinics during the year are given in tabular form below.

**Infant Welfare Clinics—Attendances**

	1956		1955	
	Children under 1 year	Children 1 - 4 years	Children under 1 year	Children 1 - 4 years
<b>Birdwell</b>				
Methodist Church Wednesdays, 2 p.m. to 4 p.m.	655	491	662	509
<b>Blacker Hill</b>				
Methodist Church Thursdays, 2 p.m. to 4 p.m. ....	786	785	897	663
<b>Worsbrough Bridge</b>				
St. John Ambulance Hall Mondays, 2 p.m. to 4 p.m. ....	1249	508	1299	290
<b>Worsbrough Dale</b>				
Community Centre Thursdays, 2 p.m. to 4 p.m. ....	1293	759	890	1241

**Ante-Natal Clinics—Attendances**

	1956		1955	
	Ante- Natal Clinic	Relax- ation Classes	Ante- Natal Clinic	Relax- ation Classes
<b>Birdwell</b>				
Methodist Church Friday, 2 p.m. to 3 p.m. .... (fortnightly)	297	106	91	135
<b>Worsbrough Bridge</b>				
St. John Ambulance Hall Tuesdays, 2 p.m. to 4 p.m. .... (fortnightly)	351	78	346	257
<b>Worsbrough Dale</b>				
Community Centre Tuesdays, 2 p.m. to 4 p.m. .... (fortnightly)	250	49	200	182

Contrary to the usual trend, all three ante-natal clinics have shown an increase in attendances. In some cases this is very marked indeed, on the other hand, it is to be regretted that the relaxation classes have fallen off to such a marked extent. I am afraid this is chiefly due to staffing difficulties which were encountered during the year.

I feel that these classes serve a very useful function in providing mothers with sound health education at a time when it is likely to do the most good and also at the time when they are in a most receptive mood.

The infant welfare clinics are in general just about holding their own, but as the vital statistics show, we cannot afford to be complacent about the maternity and child welfare services in your district.

## MENTAL HEALTH SERVICE

The work undertaken by the Mental Health Section is steadily expanding, particularly as a result of public interest through the publicity that has been given to the problem of Mental Health through the medium of the National Press, Radio and Television.

People are beginning to appreciate that mental illness is not a social stigma, as has been the case in past generations, and because of this a much more lively interest is being shown and problems that before have been shelved are now being discussed openly with an objective in mind.

From various reports it would appear that approximately 20% - 30% of patients attending General Practitioners suffer from neurosis, or other illnesses associated with mental conflict. Also, when the report of the Royal Commission who are considering the Lunacy and Mental Deficiency Legislation is issued it may show the need for Local Authorities to provide greater "after-care" facilities both for patients discharged from Mental Hospitals and patients on licence from Mental Deficiency Institutions. Both these aspects show that the Mental Health Service will still have a further need for greater expansion.

During the year there were two part-time Mental Health Social Workers in the division who carry out Statutory Supervision Mental Deficiency Visits; supervision of Guardianship and Licence Cases; After-care visits of patients discharged from Mental Hospitals, and attend Psychiatric Clinics.

### Mental Deficiency

Set out below are details of the mental defectives in this Division, who are visited by the Social Workers.

		Under 16 years		Over 16 years	
		Male	Female	Male	Female
Statutory Supervision	.....	14	20	54	61
Guardianship	.....	—	—	—	2
Voluntary Supervision	.....	1	—	23	24
Total—199.		15	20	77	87

During the year the following new cases have been notified:

Section 57(3) of the Education Act, 1944	.....	6
Section 57(5) of the Education Act, 1944, on leaving Special School	.....	1
Section 57(5) of the Education Act, 1944, on leaving Ordinary School	.....	2
Reported on transfer to this Division from outside the Area	.....	6



During the year the following defectives have been removed from the Register:

Removals to Institutions	.....	.....	.....	.....	.....	.....	.....	.....	.....	2
Transferred to other Authorities on removal from the Division	.....	.....	.....	.....	.....	.....	.....	.....	.....	2
De-classified	.....	.....	.....	.....	.....	.....	.....	.....	.....	2
Died	.....	.....	.....	.....	.....	.....	.....	.....	.....	1

### Short-stay Vacancies

Under the provisions laid down for short-stay vacancies, where relief of a temporary nature can be given in the case of illness or emergency, 5 defectives were admitted during the year for periods of up to one month. This provision is greatly appreciated and it is regretted that the Regional Hospital Board have not the accommodation to enable more vacancies to be available for this purpose.

### Occupation Centre

It is regretted that I cannot report that the Occupation Centre at The Gables, Wombwell, is functioning, but the position is now that the building is being adapted, and should be completed by the end of January, 1957.

A staff of 3 will be appointed to run the Centre; a Supervisor and 2 Assistants. The Centre will cater for 27 defectives, but it is hoped that eventually the ground adjacent to the Centre will be utilised and a further extension to the Centre be added so that a greater number of defectives may be offered the facilities of Occupation Centre training.

### Training of Mental Defectives

At present 14 children and 6 adult mental defectives are attending full-time at the Barnsley and Hemsworth Occupation Centres. Some of these mental defectives will be transferred to The Gables, Wombwell, and the vacancies created at the Occupation Centre, Barnsley, will be allocated to Darton, Royston and Cudworth.

There were two Home Teachers in this division and they gave instruction at the undermentioned Group Training Classes.

Monday,	9.30 a.m. to 3.30 p.m. The Darby and Joan Club, ROYSTON.
Tuesday,	9.30 a.m. to 3.30 p.m. The Gables, WOMBWELL.
Wednesday,	9.30 a.m. to 3.30 p.m. The Gables, WOMBWELL.
Thursday,	9.30 a.m. to 2.30 p.m. Ambulance Hall, WORSBROUGH.
Friday,	9.30 a.m. to 3.30 p.m. The Welfare Clinic, DARTON.

24 Defectives attend the Group Training Classes, and in some instances defectives attend more than one session, and are issued with travel vouchers to cover their transport.

26 defectives are visited in their homes by the home teachers, when it is not possible for them to attend the Group Training Classes.

### **Employment**

The question of obtaining employment for high grade mental defectives is becoming somewhat of a problem as there would appear to be a dearth of suitable employment. The Juvenile Employment Officer and Ministry of Labour give every assistance to try to secure work that is within the capacity of the defective.

37 Males and 19 females under Statutory Supervision and 19 males and 3 females under Voluntary Supervision are in regular gainful employment.

### **Mental Health After-Care**

During the past year there have been 45 discharges from Mental Hospitals (principally Storthes Hall Mental Hospital) and 9 deaths in Mental Hospitals have been notified. The Social Workers visit within approximately one month of the patient's discharge to enquire as to the welfare of the patient. These visits on the whole are welcomed, as the patient more often than not has had no contact with anyone since discharge and she feels that an interest is still being shown. Sometimes a visit is resented as there is a "guilt complex" on the part of the patient or relative that mental hospital treatment has been necessary, and unless the social worker is asked, no further follow up is attempted.

Some of the patients, although progressing, have some problem, which is giving rise to anxiety and delaying full recovery, and often the Mental Health Service is able to give practical assistance. Others, may be relapsing and will attend the Psychiatric Out-Patients Clinic through the General Practitioner, when advised by the Social Worker.



## SCHOOL HEALTH SERVICE

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Two important scheme in the prevention of Tuberculosis were again continued through the medium of the School Health Service during the year.

I give below details of this service.

District		No. of children tested	No. Positive	% Positive	No. Negative	Vaccinated
Cudworth	.....	128	28	21.9	100	99
Darfield	.....	72	21	29.2	51	51
Darton	.....	82	19	23.2	63	61
Dodworth	.....	49	14	28.6	35	35
Royston	.....	99	28	29.3	71	71
Wombwell	.....	170	54	31.8	116	116
Worsbrough	.....	99	13	13.2	86	84
Totals		699	177	25.3	522	517

### Tuberculin Testing of School Entrants

This service was again offered to all new entrants to infant Schools during the year. The results obtained were very similar to last year, and I think the remarks made then are still applicable.

I give below details of testing:

District	No. of children offered Tuberculin	No. of parents accepting	No. positive	No. referred	% accept- ance	% Posit- ive
<b>Royston</b>						
Total No. of children in the Survey .....	112	105	—	—	93.7	—
<b>Cudworth</b>						
Total No. of children in the Survey .....	175	156	6	3	89.0	3.8
Total without known contacts .....	172	153	3	3	89.0	1.9
<b>Darton</b>						
Total No. of children in the Survey .....	106	99	1	—	93.4	1.0
Total without known contacts .....	105	98	—	—	93.4	—
<b>Dodworth</b>						
Total No. of children in the Survey .....	74	54	11	11	72.9	20.4
<b>Darfield</b>						
Total No. of children in the Survey .....	60	56	1	—	93.0	1.8
Total without known contacts .....	59	55	—	—	93.0	—
<b>Wombwell</b>						
Total No. of children in the Survey .....	236	198	4	2	84.2	2.0
Total without known contacts .....	234	196	2	2	84.2	1.0
<b>Worsbrough</b>						
Total No. of children in the Survey .....	163	147	3	2	90.2	2.0
Total without known contacts .....	162	146	2	2	90.0	1.36
<b>Divisional Total</b> .....	926	815	26	18	88.0	3.2
<b>Totals without known contacts</b> .....	918	807	18	18	87.9	2.2
<b>Divisional Totals</b> (without Dodworth)	852	761	15	7	89.3	1.9
<b>Totals without known contacts</b> .....	844	753	7	7	89.2	0.9

Results in the Worsbrough Urban District were satisfactory and follow closely the pattern shown in the other parts of the division. One of the aims of this scheme is to discover by means of contact tracing active adult cases and, although results in respect of these were disappointing in Worsbrough, results were obtained in other parts of the division.

Routine school medical inspections were carried out by myself at the undermentioned schools:

Blacker Hill Junior Mixed and Infants.  
Worsbrough Dale Council Infants.  
Worsbrough Dale Junior Mixed.  
Birdwell Junior Mixed and Infants.  
Worsbrough Secondary Modern.

### Summary of Defects Found

School	No. of children examined	Ocular	E.N.T.	Heart	Orthopaedic	Lungs	Other	No. passed for Treatment
Blacker Hill J.M. & I.	61	5	4	1	2	—	1	9
Worsbro' Dale C. I.	130	1	11	1	1	1	9	11
Birdwell J.M. & I. ....	72	15	4	—	—	1	1	14
Worsbro' Sec. Mod. ....	280	37	4	1	2	1	6	27
Worsbro' Dale J.M. ....	142	10	4	1	3	—	3	18
	685	68	27	4	8	3	20	79

### School Clinic

**Worsbrough Bridge**, St. John Ambulance Hall

No. of children who attended and were seen by Doctor ..... 118

### Minor Ailments Clinic

#### Ward Green

No. of individual children treated by Health Visitor ..... 64

Total attendances ..... 64

#### Worsbrough Bridge

No. of individual children treated by Health Visitor ..... 239

Total attendances ..... 417

#### Worsbrough Dale

No. of individual children treated by Health Visitor ..... 60

Total attendances ..... 94

#### Blacker Hill

No. of individual children treated by Health Visitor ..... 22

Total attendances ..... 62

### Sun-Ray Clinic

#### Worsbrough Dale

No. of children attended ..... 21

Total attendances ..... 102

### Specialist Clinics

#### Ophthalmic Clinics

Mr. N. L. McNeil, M.B., D.O.M.S., Ophthalmologist.

No. of children examined ..... 257

#### Orthopaedic Clinics

Mr. T. L. Lawson, F.R.C.S., Orthopaedic Surgeon.

No. of children examined ..... 7

#### Ear Nose and Throat Clinics

Mr. W. L. Rowe, F.R.C.S., E.N.T., Surgeon.

No. of children examined ..... 32

#### Paediatric Clinics

Dr. C. C. Harvey, M.D., M.R.C.P., Paediatrician.

No. of children examined ..... 8

#### Speech Therapy Clinic

No Speech Therapist.

#### Child Guidance Clinic

Dr. S. M. Leese, Psychiatrist.

No. of children examined ..... 3

Total attendances ..... 9



## **SANITARY CIRCUMSTANCES OF THE DISTRICT**

I am indebted to Mr. J. Shepherd, your Engineer and Surveyor, for the following report.

### **Sewerage**

During 1956 the following lengths of additional foul and surface water sewers were laid in connection with new Housing Development:

230 yds. 9" foul sewer  
700 yds. 6" foul sewer  
900 yds. 6" surface water sewers

### **Sewage Disposal Works**

A good standard of effluent was maintained at the Sewage Works and the sewer diversion to bring the sewage from the south end of Birdwell to the Worsbrough Dale works was laid but the connection across the railway was delayed due to colliery subsidence. When this is completed the number of houses draining to the Sewage Works at Birdwell will be approximately 200. This will improve the conditions at the Birdwell Works.

### **Water Supply**

The total consumption of water during the year amounted to 137,353,000 gallons and of this some 115,500,000 gallons were taken by domestic consumers. This shows the consumption per head per day to be 26.4 gallons made up of 22.2 gallons per head per day domestic and 4.2 gallons per head per day industrial and commercial.

The Council also supplied 4,650 gallons per day in bulk to Tankersley in the Wortley Rural District area.

During the year some 330 yds. of 4" water mains were laid in connection with housing development.

The usual high standard of purity of water was maintained as shown by the Analyst's report to the Barnsley County Borough for supplies from the Midhope supply.

## Rainfall

Daily readings of rainfall are taken at the Council's Sewage Works and the monthly totals were as follows compared with the two preceding years.

		1954	1955	1956
January	.....	1.66 ins.	1.11 ins.	3.35 ins.
February	.....	1.65 ins.	2.76 ins.	1.16 ins.
March	.....	1.65 ins.	2.84 ins.	0.72 ins.
April	.....	0.22 ins.	0.45 ins.	2.85 ins.
May	.....	3.54 ins.	2.59 ins.	0.45 ins.
June	.....	1.42 ins.	2.45 ins.	2.76 ins.
July	.....	1.27 ins.	0.45 ins.	4.65 ins.
August	.....	4.85 ins.	0.28 ins.	5.87 ins.
September	.....	1.46 ins.	0.73 ins.	3.39 ins.
October	.....	3.36 ins.	1.92 ins.	1.16 ins.
November	.....	5.02 ins.	2.15 ins.	0.77 ins.
December	.....	2.79 ins.	2.49 ins.	3.00 ins.
		<hr/>	<hr/>	<hr/>
		28.89 ins.	20.22 ins.	30.13 ins.
		<hr/>	<hr/>	<hr/>

## Housing

The number of houses completed during 1956 was as follows:

3 bedroom type houses (contract)	.....	10
3 bedroom type (Direct Labour)	.....	40
Shops with 3 bedroom maisonettes over (Contract)	.....	4
3 bedroom type houses with shops attached (Direct Labour)	.....	2
County Council Police Houses	.....	2
Private Enterprise	.....	6
		<hr/>
		64
		<hr/>

## GENERAL EPIDEMIOLOGY

141 cases of infectious diseases were notified in 1956 as compared with 464 in 1955.

### Statement of Notification of Infectious Diseases received during the year

Scarlet Fever	.....	.....	.....	.....	.....	.....	.....	.....	9
Pneumonia	.....	.....	.....	.....	.....	.....	.....	.....	28
Acute Poliomyelitis (paralytic)	.....	.....	.....	.....	.....	.....	.....	.....	1
Meningococcal Infection	.....	.....	.....	.....	.....	.....	.....	.....	3
Dysentery	.....	.....	.....	.....	.....	.....	.....	.....	2
Erysipelas	.....	.....	.....	.....	.....	.....	.....	.....	7
Respiratory Tuberculosis (New Cases only)	.....	.....	.....	.....	.....	.....	.....	.....	7
Other Forms of Tuberculosis (New Cases only)	.....	.....	.....	.....	.....	.....	.....	.....	1
Measles (excluding German Measles)	.....	.....	.....	.....	.....	.....	.....	.....	11
Whooping Cough	.....	.....	.....	.....	.....	.....	.....	.....	71
Food Poisoning	.....	.....	.....	.....	.....	.....	.....	.....	1
									141

### Patients removed to Hospital

Dysentery	.....	.....	.....	.....	.....	.....	.....	.....	1
Scarlet Fever	.....	.....	.....	.....	.....	.....	.....	.....	6
Erysipelas	.....	.....	.....	.....	.....	.....	.....	.....	2
Pneumonia	.....	.....	.....	.....	.....	.....	.....	.....	4
Acute Poliomyelitis (Paralytic)	.....	.....	.....	.....	.....	.....	.....	.....	1
Meningococcal Infection	.....	.....	.....	.....	.....	.....	.....	.....	3

### Infectious Diseases in Age Groups

			Under								Age	Total	
			1	1-3	3-5	5-10	10-15	15-25	25-45	45-65	65+		U.K.
Pneumonia	.....	.....	2	3	—	3	3	2	4	7	4	—	28
Erysipelas	.....	.....	—	—	—	—	1	2	1	1	2	—	7
Scarlet Fever	.....	.....	—	1	2	4	1	1	—	—	—	—	9
Whooping Cough	.....	.....	6	19	22	22	1	—	—	—	—	1	71
Measles	.....	.....	2	5	3	1	—	—	—	—	—	—	11
Meningococcal Infect.			1	—	1	—	—	—	—	1	—	—	3
Acute Polio. Paralytic			—	—	—	1	—	—	—	—	—	—	1
Dysentery	.....	.....	—	—	—	2	—	—	—	—	—	—	2
Food Poisoning	.....	.....	—	1	—	—	—	—	—	—	—	—	1

### Distribution in the Wards

					North	South	East	West	Total
Measles	.....	.....	.....	.....	5	3	—	3	11
Whooping Cough	.....	.....	.....	.....	46	4	10	11	71
Scarlet Fever	.....	.....	.....	.....	3	3	1	2	9
Pneumonia	.....	.....	.....	.....	10	2	11	5	28
Pulmonary Tuberculosis	.....	.....	.....	.....	3	1	1	2	7
Non-Pulmonary Tuberculosis	.....	.....	.....	.....	1	—	—	—	1
Food Poisoning	.....	.....	.....	.....	1	—	—	—	1
Acute Poliomyelitis: Paralytic	.....	.....	.....	.....	1	—	—	—	1
Dysentery	.....	.....	.....	.....	1	1	—	—	2
Meningococcal Infection	.....	.....	.....	.....	—	1	1	1	3
Erysipelas	.....	.....	.....	.....	3	2	1	1	7



## **Scarlet Fever**

9 cases of Scarlet Fever were notified as compared with 18 in 1955. Of the 9 cases, 6 were admitted to hospital.

## **Measles**

In contrast to the previous year, only 11 cases were notified during the year. These were sporadic and no comment is required.

## **Whooping Cough**

The number of cases notified in 1956 was slightly more than in the previous year with 71 cases as against 60 in 1955. The disease was sporadic throughout the year, although it did reach a slight peak in July and August. As far as my records show, immunisation against Whooping Cough produced a very poor response in which 34 infants were immunised during the year. This represents only 15% of the births and this is a deplorable position.

Whooping Cough is a dangerous disease in babies, and it is well worth parents making the effort to have their children immunised against it.

## **Smallpox and Diphtheria**

No cases of Diphtheria or Smallpox occurred in your district during 1956, and I can, therefore, pass quickly to the subject of prevention.

The number of babies vaccinated against smallpox in 1956 was 52 as compared with 57 in 1955. This represents approximately 20% of the births for the year. This cannot be regarded as satisfactory, although the position is not so critical here as with the pre-school Diphtheria and Whooping Cough immunisations.

The overall number of children immunised against Diphtheria remained unchanged with 68.2% of all children immunised between the ages of 0-14 years. 81.3% of all children between 5-14 years were protected, but only 10.46% in the age group 0-4 years. This is indeed a deplorable state of affairs. However, I do feel that with the more general introduction of a joint vaccine we might stand more chance of persuading parents to accept immunisation against both Whooping Cough and Diphtheria. I have always felt that the number of injections given in the first year of life is rather high and with Poliomyelitis vaccine being brought down into the infant age range this would again add to the burden.

## **Poliomyelitis**

One case of Paralytic Poliomyelitis occurred in Worsbrough during 1956. This was in a child aged 5 and by the end of the year no residual paralysis remained.

A start was made in May/June of 1956 to immunise those children who had registered in the early part of the year. Supplies of vaccine were very small and it is regretted that by the end of the year only about 10% of the children registered, had in fact been vaccinated. It is to be hoped that with improved supplies of vaccine in 1957 that the remaining 90% will be completed during the current year.

## **Tuberculosis**

There were 7 new cases of Pulmonary Tuberculosis and one case of non-Pulmonary Tuberculosis notified in 1956, as compared with 6 and nil in 1955. I am happy to report for the first time that no deaths occurred from the disease during the year.

A visit was made by the Mass Radiography Unit to your district in April, 1956, and I give below the main results of this survey.

Total Radiographed .....	1,011
Tuberculosis: Active .....	Nil
Inactive .....	4

## **Other Diseases and abnormalities**

Bacterial and virus infections of the lungs .....	1
Bronchiectasis .....	1
Pulmonary fibrosis—non-tuberculous .....	10
Pneumoconiosis .....	45
Pleural thickening or calcification—non-tuberculous .....	1
Acquired abnormalities of heart and vessels .....	6

The response was not very satisfactory and I hope that when the Unit again visits Worsbrough in July, 1958, that people will make a real effort to attend and make the scheme a success. I regard such routine surveys as a valuable asset in our efforts to discover the latent source of infection to the community.

Every endeavour was made to ensure that children who participated in the B.C.G. Scheme the previous year were given a check X-Ray at the unit.

I would like to pay tribute to the vast amount of work carried out by the Tuberculosis Health Visitors, in conjunction with the Chest Physician, in ensuring that contacts attend for examination. I feel that this is one sphere where there is excellent co-ordination and co-operation between the hospital and the local authority services.

## Tuberculosis—New Cases and Mortality in 1956

Age Periods	NEW CASES				DEATHS			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M	F	M	F	M	F	M	F
0- 1	—	—	—	—				
1- 5	—	—	—	—				
5-10	—	—	1	—				
10-15	—	—	—	—				
15-20	—	1	—	—				
20-25	1	1	—	—				
25-35	1	1	—	—				
35-45	—	—	—	—				
45-55	—	—	—	—				
55-65	—	—	—	—				
Over 65	2	—	—	—				
Totals	4	3	1	—	—	—	—	—

## Tuberculosis—Record of Cases during 1956

	Pulmonary		Non-Pulmonary	
	M	F	M	F
No. of cases on register at 1st January, 1956	30	28	3	4
No. of cases notified for the first time during the year	4	3	1	—
No. of cases restored to register	1	—	—	—
No. of cases added to register otherwise than by notification	—	2	—	—
No. removed to other districts	1	1	—	—
No. cured or otherwise removed from register	1	—	1	—
No. died from Tuberculosis	—	—	—	—
No. died from other causes	2	—	—	—
Total at end of 1956	31	32	3	4

## Tuberculosis—New Cases and Mortality for the past ten years

Year	NEW CASES		DEATHS	
	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary
1947	12	5	9	2
1948	13	4	11	5
1949	14	3	3	1
1950	16	4	3	2
1951	14	3	3	1
1952	10	5	4	—
1953	12	—	3	—
1954	8	1	1	—
1955	6	—	1	—
1956	7	1	—	—



**ANNUAL REPORT**  
**of the**  
**Public Health Inspector and Cleansing Superintendent**  
**for the year of 1956**

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Mr. Chairman and Gentlemen,

I have very great pleasure in submitting to you my thirteenth Annual Report on those matters regarding the health of Worsbrough for which my department is responsible.

It is once again pleasing to record my appreciation of the continued interest and support given me by the members of the Council, and also by my fellow officials with whom I have continued to work in the same friendly and close co-operation which is so characteristic of your officials.

I must not fail to thank the three members of my staff for the assistance and loyalty they have given me also during the year.

The following pages give some account of the work of the department, but it is obvious that there are hundreds of "little" matters of which no record can be made but which are every bit as important as the larger ones.

1956 saw the introduction of two very important pieces of public health legislation viz. The Food Hygiene Regulations 1955 and the Clean Air Act 1956.

The former came into operation on the first day of the year and we were able to bring about some of the objective effects of the Regulations and we look forward to the future, confident that the more abstract benefits will follow fairly quickly.

The Clean Air Act on the other hand, only came into force on the very last day of the year, and even then, only in part, but further reference to this follows in the appropriate section on the following pages.

The Council are also to be complimented on their progress during the year in the matter of slum clearance, details of which will be found in my report.

It was during 1956 that the Sanitary Inspector received a new legal designation, that of "Public Health Inspector", which I feel is some recognition of the part he has played in the progress that has been made in the field of public health, during the present century. The new title also emphasises the difference in the nature of his job since he was first called "Inspector of Nuisances" some eighty years ago.

1956 saw a change in Medical Officers of Health, Dr. Hynd leaving towards the end of the year, and Dr. Barnes taking up the appointment on the 1st December.

Relations with Dr. Hynd were always on the most friendly basis and I know that they will be no less harmonious with Dr. Barnes.

Finally, I should like to thank the Chairman of the Public Health Committee, Councillor R. Atkinson, for his continued support and interest during the year.

Your obedient servant,  
LYNDON DOVE,  
Chief Public Health Inspector

**Water Supply**

You will have already read from the Surveyor's contribution to this Annual Report that the Council purchase water in bulk from the Barnsley Corporation and are then responsible for its redistribution, and he also gives figures showing the extension of water mains that has taken place, and the daily consumption per head of population.

There are however still six houses in the district which do not have a piped main supply, viz :

Nos. 11a to 15 Dovecliffe Cottages — 4 houses  
Dovecliffe Station ..... — 2 houses

As explained in previous reports, the first four houses derive their supply from a land spring which is piped into a large underground storage tank. It is then piped into the houses by gravity and actually delivers by tap over the kitchen sinks. There has again been no interference with the supply during the year.

The other two cottages do have town's water, but it is delivered in churns daily by rail.

**Closet Accommodation**

There were no conversions from privies to proper water closets neither were there any privy conversions.

The Council have never, so far, enforced the conversion of any of these obsolete types of conveniences, but have been able to obtain all the progress they have made so far by persuasion and co-operation, plus a grant of up to £12/0/0 per conversion.

The number of sanitary conveniences of various types in the district is :

Water closets	.....	4283
Waste water closets	.....	14
Chemical Closets	.....	4
Privies with covered middens	.....	60



The privies are almost entirely situated in the rural parts of the area and there is no sewer available for their conversion. We do have several on The Walk at Birdwell but here again, the solution is not the simple one of connecting to the available sewer, because the present buildings are below sewer level, and completely new water closets will have to be built in a different situation.

The four chemical closets serve the four cottages at Dovecliffe already mentioned as having no towns water supply. The houses are on the Council's schedule of unfit dwellings.

### **Public Cleansing**

Street sweeping, street gully cleansing and cleansing and maintenance of public conveniences is the concern of the Engineer and Surveyor.

There are no public W.C's in the area, but there are four men's urinals, three on the main road, A 61, which runs through the centre of the district from north to south, and the other at the bottom of High Street, Worsbrough Dale.

There are no facilities of any kind for women.

### **House Refuse Collection**

The collection and disposal of house refuse comes under my control.

During the year we have maintained the excellent service we have always given the public, that of their dustbins being emptied every seven days, and the privies cleansed every fourteen days. The only deviation from this has been immediately following holidays and then only a very short period of perhaps a fortnight has elapsed before we were back on schedule. It is a fact that a good service makes the public more particular than a bad one, for we are soon receiving telephone calls asking what has gone wrong, if we are a little behind at holiday times.

It has been the practice to have two vehicles engaged full-time on the work, and one part-time. During the year, the Council pursuing its policy that only the best and most up-to-date is good enough for Worsbrough purchased a 16/18 cubic yard Shelvoke & Drewry rear loading Fore and Aft tipper, and this came into operation in May. With the advent of this lorry we reduced the collection staff by one man, and we now have six men on one lorry and four on the 7 cubic yard lorry. In addition to these we have a foreman and a tipman. We are all indebted to these men for a good job of work well done, very often under appalling weather conditions.

### **House Refuse Disposal**

This is done by controlled tipping in strategic parts of the district.



Most of the refuse is tipped on a new tip adjoining the former Brough Green tip and here again we are doing a good job of work in raising the level of low lying land for a local farmer and in return we pay no rent for the land. This tip came as a blessing to the Council for we had no site to follow on with when the Brough Green tip was finished, and it is situated very near the centre of the township thus obviating long hauls.

We have three other tips in very limited use, the first being at Pilley Hill, Birdwell, which we use one day per week to deal with the refuse from Birdwell. A second tip is at Blacker Hill which is used one morning per week to receive the refuse from the village of Blacker Hill.

We had been retaining another tip on the main Sheffield Road for a nominal annual rental, but in the new rating proposals a valuation of £16 a year was put on the land, so we completed the tip and gave up the tenancy.

### **Tents, Vans and Sheds**

There are no sites in the area which the Council have licensed for moveable dwellings.

One application was received for permission to station and use a caravan on land on the fringe of our boundary at Stairfoot from an engineer who was engaged on the erection of a gas holder at Manvers Main Colliery. The Council agreed to issue a licence for a period of six months.

### **Smoke Abatement**

As stated in my opening remarks, the Clean Air Act 1956 came into operation, but not until the 31st December and consequently had no effect upon this report.

Many authorities were disappointed that the Act will not operate in its entirety, with the result that industrial smoke will still be allowed to continue subject to the existing unsatisfactory and inadequate legislation. It does however contain a challenge with regard to domestic smoke and it will be interesting to see how many authorities accept it.

Worsbrough has not awaited any new legislation to try and reduce atmospheric pollution though, but has been in continual contact with the two industrial concerns in the district which do cause us undoubted trouble, namely the Barnsley District Coking Company and the Barrow Colliery unit of the National Coal Board.

We still continue to receive occasional complaints about grit emission at Blacker Hill from the furnace chimney at the coking plant but all are agreed that the grit nuisance has been considerably lessened since we obtained the installation of grit arresting chambers at the Works last year. The emission of smoke from this chimney is still far too excessive and it is necessary to draw the attention of the management to it all too often. The Company did decide to install economisers in the furnace flues and they felt that these would bring about a reduction in smoke emission in addition to performing their main function of preheating the boiler feed supply. These were not completed until December, so we could not prove whether they will reduce smoke emission or not. I have my doubts.

With regard to the Barrow Colliery chimney; this also gives us quite a lot of trouble and it is necessary to make complaint to them periodically. The colliery engineer informed me that as a result of our complaints, they had asked their Plant Engineers to carry out tests on the boilers and these were proceeding at the year end.

It was necessary to draw the attention of Messrs. Johnson & Barnes to smoke nuisance from their boiler chimney. They have a large sectional boiler supplying heating and washing requirements only, and it is fired by underfeed stoker and should give rise to little if any nuisance. It was found that the trouble was being caused by careless cleaning of the firegrate and the matter was quickly and easily put right.

### **Colliery Spoilbanks**

There is only one of these in the area, a very large one too, but it is kept under exceedingly good control and no nuisance from burning has arisen again this year and I have always appreciated the co-operation of the National Coal Board on this matter.

### **Eradication of Bed Bugs**

The furniture, etc. of seven families who had been given the tenancy of council houses were subjected to van fumigation in transit during 1956.

It is a condition of tenancy that where I consider it necessary, the furniture in vermin infested houses shall be moved by fumigation van. The Council make a fixed charge of £3/5/0 for this removal and bear the rest of the charge themselves.

Three other cases of bug infestation were treated by insecticidal spray and the tenants charged according to a fixed scale we have, based on the number of rooms treated.



## **Other Pests**

Forty complaints of infestation by cockroaches were received during the year and free issues of insecticide powder were made in each case.

This is a fairly common complaint in the district and one which can only be remedied by the persistent and unremitting endeavours of the householders.

There were five other complaints of insect infestation, four of earwigs and one of silverfish. Earwig invasion of property is a seasonal affair and there is little we can do about it.

## **Rodent Control**

The Council carry out the recommendations of the Ministry of Agriculture and Fisheries with regard to rodent control and receive a 50% grant towards all expenses other than those for treatment of business premises.

The usual 10% test bait of sewers was made, as a result of which we were informed that no further treatment of sewers was necessary during the year, which was an extremely satisfactory state of affairs.

The Divisional Rodent Officer made a request for permission to use the council chamber for a rodent operative's course, to which the Council readily agreed and made no charge for the use of the room. A very interesting aspect of this course was that the Ministry's Technical Officer was unable to find any premises in the district which had an infestation worthy of using for demonstration purposes. Visits were made to the sewage farm, piggeries, etc., to no purpose, and the practical side of the course had to be demonstrated a little further afield.

## **Mining Subsidence**

One part of the area, Birdwell, became very sorely afflicted by mining subsidence to an extent which attracted the attention of the national Press and the B.B.C.

Damage to buildings came under the jurisdiction of the Engineer and Surveyor, but one outcome of this was flooding of the cellars of nine houses with sewage polluted water, and we naturally entered the picture.

Extensive colour testing of drains revealed the source of the sewage and the National Coal Board took immediate steps to divert the responsible drain. Flooding of the cellars with subsoil water, however, was not so easily overcome as the cellar drains suffered an 18" backfall and the property subsided some 2-ft. Again, the N.C.B. met us on the site and I was given unrestricted authority to keep the cellars pumped clear of water and this proceeded from the middle of the year onwards.

## INSPECTION AND SUPERVISION OF FOOD

### Milk Supply

The Council have no control over milk production, this rests with the Ministry of Agriculture and Fisheries.

Although we have no control over the farm premises we still have a responsibility for ensuring the milk which reaches the public is safe, and this is done by sampling in course of delivery. We are, of course, a specified area within which only bottled milk can be sold, and this is mainly the product of two large dairies.

Seventeen samples were taken during the year and submitted to the Public Health Laboratory at Wakefield for the examination appropriate to the type of milk.

Seven of these were raw milks, three of local production, and all were reported on as being free from tubercle bacilli.

The other ten milks were heat treated products, five each of Tuberculin-tested (Pasteurised) and ordinary Pasteurised and all were satisfactory.

### Ice Cream

There are twenty-eight premises in the district registered under Section 16 of the Food & Drugs Act 1955 for the sale or manufacture of ice cream.

All these, with one exception, are registered for the sale only and are the ordinary small general dealer's type of shop dealing in a pre-wrapped product only.

The one exception, is the manufacturer who has the ice cream factory at Birdwell and who regularly produced Grade 1 samples during the year.

Forty-two samples of ice cream were taken from dealers and submitted for bacteriological examination with the results shewn below :—

		No. of Samples taken	Provisional Grades			
			1	2	3	4
Manufacturer	No. 1	5	5	—	—	—
Manufacturer	No. 2	11	10	1	—	—
Manufacturer	No. 3	5	4	—	—	1
Manufacturer	No. 4	5	4	—	—	1
Manufacturer	No. 5	4	4	—	—	—
Manufacturer	No. 6	5	4	1	—	—
Manufacturer	No. 7	3	3	—	—	—
Manufacturer	No. 8	4	3	1	—	—
		42	37	3	—	2



## **Meat Supply**

There are no slaughterhouses in the district, the Council having decided that adequate facilities were available at the nearby Public Abattoir in Barnsley and being upheld in this belief by the Ministry of Food after a local inquiry.

Inspection of meat is therefore confined to shops and vans, and it was not found necessary to condemn any of this food during the year.

## **Food Hygiene**

As stated earlier in this report, this year saw the introduction of the Food Hygiene Regulations and unlike so much legislation, there did seem to be something here that we could get our teeth into and see some results for our efforts.

The Medical Officer of Health, who, as you are aware, is responsible for seven county districts, suggested that we all had a meeting with a view to formulating a uniform policy of action and interpretation throughout the Division, which covers a large area surrounding Barnsley. It was felt that this would make our work so much easier because food traders would have no complaint that we were asking for improvements which other inspectors were not insisting on.

A series of meetings were held, both with the Medical Officer, and between ourselves, and we finally prepared lists of what we felt the Regulations reasonably required, and these were scheduled separately for each type of food business. We then submitted them to our respective Councils, all of which accepted them, and they were sent out to each food business. These lists did not have the force of law, but each item was, in the considered opinion of all of us, a reasonable interpretation of the Regulations and one which we felt would be upheld in the magistrates court.

A survey was then made of all shops, public houses, clubs, etc., and the occupiers informed in what respects they did not match up to the requirements.

This occupied a great deal of time during the year, at a time when we were also going full steam ahead on slum clearance, but we did achieve some real progress, and found that on the whole, shopkeepers had been made receptive to the Regulations by local and national propaganda and through the medium of their trade journals.

I still believe the public themselves can achieve more than any legislation if they will refuse to shop at premises where it is obvious that methods are careless, and take their trade to the shops that deserve it—the obviously clean ones, and I do not think that this can be too strongly publicised.

During the year I was asked to repeat my previous talk on "Food Hygiene" to the Worsbrough Dale Parent Teachers' Association, which consists entirely of housewives.

Two notices were served under the Food & Drugs Act requiring minor matters to be put right.

## Unsound Food

Complaint was made by a householder about contamination of sliced bread by what I believed to be oil.

The matter was taken up with the bakery concerned, a large firm in a nearby town, and it was indeed found to be oil. They were most concerned and apologetic and satisfied us that they were doing everything possible to maintain a high standard of cleanliness. They had been let down by the human element, as is so often the case. The firm was baking some half million units a week and they invited the Public Health Committee to go along and see for themselves the efforts they were making to produce clean food.

The Council considered the matter, did not visit the bakehouse, and decided a strong warning was appropriate to the case.

A more serious type of contamination was alleged in another instance, that of a fairly large piece of broken glass in a tin of baked beans. The firm's manager came to my office and insisted it was an impossibility for the glass to have gained entrance in their factory. The Council also issued a warning in this case, although it cannot be accepted that foreign objects only arise from the negligence of the housewife, as some of these large food firms would often have us believe!

## **HOUSING**

### **New Houses**

The number of council houses completed in 1956 was again lower than the preceding year being 56, as against 81 in 1955 and 158 in 1954.

42 of these were built by the Council's own direct labour organisation, 40 being three-bedroomed type and the other 2 were three-bedroomed type houses with shops attached.

The other 14 houses were built by contract and consisted of 10 three-bedroom type, and 4 shops with three-bedroomed maisonettes over.

The shops were a new venture and were built on new housing estates to provide service to the tenants.

Eight houses were built otherwise than by the Council and comprised 2 County Council police houses on the Elm House Estate and 6 by private enterprise. This figure of 8 is a welcome improvement on last year's miserable figure of 2.

### **Council House Lettings**

The Council continued its policy of letting houses strictly in accordance with the date of the application with the exception of any case in respect of which the Medical Officer made a recommendation.

The only thing that can be said in favour of this system is that it can be seen by everyone to be fair and applicants do know exactly where on the list they stand. It does not make any provision for exceptional cases which do from time to time arise such as serious moral overcrowding, which I think should be taken care of by a social service. There are of course arguments against it, as we know that all serious overcrowding isn't always genuine and can be quite easily caused intentionally.

The Council have been able to continue the extraordinarily low rent of 14/5d. exclusive of rates for a post-war three-bedroomed house and this for a fifty week rent year, tenants receiving a "free" week at Barnsley Feast and Christmas. This is not achieved by levying a high general rate for this also cannot be bettered by many, if any, surrounding authorities, being only 16/8d. in the pound.



## Overcrowding

Thirty-five cases of overcrowding were relieved in 1956, a number which appears to be rather high. The majority of these cases were not legally overcrowded, but overcrowded morally, based on a bedroom standard.

## Unfit Houses

The Council have for the past few years pursued a steady policy of securing the closure or demolition of dwellings which are not considered fit for human habitation. This has been achieved mainly by co-operation with owners, a good example being the 54 back-to-back houses in Jarrott's Buildings. At the end of 1955 forty-seven had been closed, but in 1956 the remaining seven were also closed and the Council purchased the site for re-development and by the end of the year most of the empty houses had been demolished.

In June, we made our first official clearance orders in respect of the following properties, forty-five in all :

1, 2, 3, 4, 5 and 6 Robinson Square, Birdwell.

1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13 and 14 Robinson Terrace, Birdwell.

3, 4, 5, 6, 7 and 8 Parker Terrace, Birdwell.

26 and 28 Chapel Street, Birdwell.

1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16 and 17 Mitchell Street, Swaithe.

Objections were received to the Robinson Square and Mitchell Street property and a Public Local Inquiry was held in December.

In June also, six individual unfit houses were recommended for action and all were dealt with, the families being rehoused by the Council.

Later in the year, the Housing Committee increased their allocation of houses for slum clearance purposes to seventy-two and in November three more Clearance Areas comprising sixteen houses were represented viz. :

2, 4, 6, 8, 10 and 12 Worsbrough Road, Blacker Hill.

137 and 139 Mount Vernon Road, Ward Green.

3, 4, 5, 6, 7, 8, 9 and 10 Johnson's Yard, Worsbrough Dale.

An objection was received in respect of the Mount Vernon Road property but the Inquiry was not held until 1957.

A claim for a well-maintained payment was made for Johnson's Yard but this property was not inspected by the Ministry until 1957 also.

In addition to the sixteen houses in clearance areas, a further fifteen individual unfit houses were also put forward in November for action by the Council as follows :—

27, 28, 29 Pantry Hill, Worsbrough Dale.  
2, 3, 4 Hoyland Square, Worsbrough Dale.  
1 Beaumont Cottages, Worsbrough Bridge.  
40 Wentworth Road, Blacker Hill.  
Vernon Lodge, Blacker Hill.  
5 Rockley Row, Worsbrough Bridge.  
2 cottages Wood Nook, Rockley.  
3 Pilley Hill, Birdwell.  
1 Blackburn Row, Worsbrough Bridge.  
1 George Street, Worsbrough Dale.  
7 Lobwood Lane, Worsbrough Dale.

Action was also taken to secure the closure of any house which became vacant and was unfit and in this category the following houses became the subject of closing orders :—

3, 4, 6 Rockley Row, Worsbrough Bridge.  
1 and 2 Rockley Bottom, Birdwell.

It will be seen from the above that eighty-one slum houses were dealt with during the year, out of a total list submitted to the Ministry in 1955 of 324 houses for a suggested ten year programme. In other words, the Council dealt with a quarter of its problem in one year, which I think is impressive action, judged by any standards!

Further progress was made with the scheme for the redevelopment of Worsbrough Dale referred to last year. The special sub-committee formed to deal with this project had several meetings and their negotiations proceeded to such an extent as to allow the scheme to go forward in 1957.

### **Improvement Grants**

Eleven applications were made by property owners for Improvement Grants and all were granted.

This could have been a wonderful idea if landlords would carry it out, but unfortunately they will not, and it has become a very useful means for owner-occupiers to improve their own houses. This is very commendable, but the main object of the Act has completely misfired, in Worsbrough at least.

## Housing Statistics

1.	Inspection of dwellinghouses during the year.	
(1)	(a) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts) .....	419
	(b) Number of inspections made for the purpose .....	1168
(2)	(a) Number of dwellinghouses (included under sub-head (1) above), which were inspected and recorded under the Housing Consolidated Regulations .....	61
	(b) Number of inspections made for the purpose .....	61
(3)	Number of dwellinghouses needing further action :—	
	(a) Number considered to be in a state so dangerous or injurious to health as to be unfit for human habitation .....	61
	(b) Number (excluding those in sub-head (3) (a) above) found not to be in all respects reasonably fit for human habitation	358
2.	Remedy of defects during the year without service of formal notices. Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their officers .....	169
3.	Action under Statutory Powers during the year.	
	A. Proceedings under Sections 9, 10 and 16, Housing Act, 1936 :—	
	(1) Number of dwellinghouses in respect of which formal notices were served requiring repairs .....	Nil
	(2) Number of dwellinghouses which were rendered fit after service of formal notices :—	
	(a) By owners .....	Nil
	(b) By Local Authority in default of owners .....	Nil
	B. Proceedings under Public Health Acts.	
	(1) Number of dwellinghouses in respect of which notices were served requiring defects to be remedied .....	57



(2) Number of dwellinghouses in which defects defects were remedied after service of formal notices :—		
(a) By owners .....	48	
(b) By Local Authority in default of owners .....	3	
C. Proceedings under Sections 11 and 13 of the Housing Act, 1936.		
(1) Number of representations, etc., made in respect of dwellinghouses unfit for habitation .....	33	
(2) Number of dwellinghouses in respect of which Demolition Orders were made .....	Nil	
(3) Number of dwellinghouses in pursuance of Demolition Orders .....	Nil	
(4) Any action under Sections 10 and 11 of the Local Government (Miscellaneous Provisions) Act, 1953? If so, what? .....	7 houses closed in lieu of demolition orders	
D. Proceedings under Section 12 of the Housing Act, 1936.		
(1) Number of separate tenements or under- ground rooms in respect of which Closing Orders were made .....	Nil	
(2) Number of separate tenements or under- ground rooms, the Closing Orders in respect of which were determined, the tenement or room having been rendered fit	Nil	
E. Proceedings under Part III of the Housing Act, 1936, and the Housing Repairs and Rents Act, 1954.		
(1) Number of Clearance Areas represented during the year .....	6	
(2) Number of houses included in these areas	61	
(3) Number of persons to be displaced .....	135	

(4) Action taken during the year in respect of Clearance Areas :—		
(a) by Clearance Orders, number made .....		0
(b) by Compulsory Purchase Orders, number made .....		0
(5) Number of houses in Clearance Areas demolished during the year .....		0
(6) Number of persons re-housed from houses demolished during the year .....		0
4. Housing Act, 1936—Part IV—Overcrowding.		
(a) (1) Number of dwellings overcrowded at the end of the year .....	Not known	
(2) Number of families dwelling therein .....		0
(3) Number of persons dwelling therein .....		0
(b) Number of new cases of overcrowding reported during the year .....		3
(c) (1) Number of cases of overcrowding relieved during the year .....		35
(2) Number of persons concerned in such cases		120
5. New Houses.		
Number of new houses provided during the year :—		
By the Local Authority :—	Permanent type .....	56
	Temporary type .....	—
By Private Enterprise .....		8
6. Housing Act, 1949.		
Section 4—Any action in connection with advances for purpose of increasing housing accommodation?		No
7. Housing Act, 1949, as amended by Housing Repairs and Rents Act, 1954.		
Grants to persons other than local authorities for improvement of housing accommodation.		
Any action during the year? .....		Improvement grants were made to 11 persons during the year.

## Visits and Inspections

### Infectious Disease

T.B. Domiciliary visits	.....	.....	.....	.....	.....	.....	.....	9	
Other infections	.....	.....	.....	.....	.....	.....	.....	28	
Disinfections	.....	.....	.....	.....	.....	.....	.....	1	
								—	38

### Sanitary Matters

Nuisance inspections	.....	.....	.....	.....	.....	.....	.....	404	
Nuisance re-inspections	.....	.....	.....	.....	.....	.....	.....	390	
Piggery inspections	.....	.....	.....	.....	.....	.....	.....	1	
Colliery spoilbanks	.....	.....	.....	.....	.....	.....	.....	4	
Formal smoke observations	.....	.....	.....	.....	.....	.....	.....	4	
Works in progress	.....	.....	.....	.....	.....	.....	.....	50	
Moveable dwellings	.....	.....	.....	.....	.....	.....	.....	3	
Tip inspections	.....	.....	.....	.....	.....	.....	.....	130	
								—	986

### Miscellaneous Visits

re : Cleansing and Salvage	.....	.....	.....	.....	.....	.....	.....	21	
Factories	.....	.....	.....	.....	.....	.....	.....	40	
Hairdressers' shops	.....	.....	.....	.....	.....	.....	.....	6	
Miscellaneous journeys	.....	.....	.....	.....	.....	.....	.....	585	
Shops Act	.....	.....	.....	.....	.....	.....	.....	15	
Rodent inspections	.....	.....	.....	.....	.....	.....	.....	43	
Interviews and appointments	.....	.....	.....	.....	.....	.....	.....	231	
								—	941

### Food Premises Inspections

Bakehouses	.....	.....	.....	.....	.....	.....	.....	51	
Fried fish shops	.....	.....	.....	.....	.....	.....	.....	26	
General food shops	.....	.....	.....	.....	.....	.....	.....	168	
Butchers premises and vans	.....	.....	.....	.....	.....	.....	.....	79	
Licensed premises	.....	.....	.....	.....	.....	.....	.....	4	
Ice cream factory	.....	.....	.....	.....	.....	.....	.....	8	
Canteens	.....	.....	.....	.....	.....	.....	.....	1	
Food samples	.....	.....	.....	.....	.....	.....	.....	59	
								—	396

### Dwellings

Inspections for defects	.....	.....	.....	.....	.....	.....	.....	419	
Re-inspections for defects	.....	.....	.....	.....	.....	.....	.....	749	
Council houses	.....	.....	.....	.....	.....	.....	.....	22	
Overcrowding	.....	.....	.....	.....	.....	.....	.....	14	
								—	1204
									3565







